	Under the Paners	ork Redu	etion Act o	of 1995, no ne	rsons are	reat	ired to r	U. S. Pate	ent a	Appro-	ved for use thr k Office; U.S. on unless it dis	ough 10 DEPAI	PTO/ V31/2002. OI RTMENT OF valid OMB c	SB/06 (08-00 MB 0651-003 COMMERC ontrol number
Approved for use through 10/31/2002. OMB 0651-0 U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMME! Under the Panerwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number 10/075, 456														
CLAIMS AS FILED - PART 1 (Column 1) (Column 2)										SMALL	ENTITY	OR	OTHER T	
FOR			NUMBER FILED			NUMBER EXTRA			1	RATE	FEE	1	RATE	FEE
BASIC FEE (37 CFR 1.16(a))									1	- : :	s	OR		s
TOTAL CLAIMS (37 CFR 1.15(c))			29 minus 20 =			• 9				× \$=		OR	× \$/8 =	162
INDEPENDENT CLAIMS (37 CFR 1.16(b))				6 minus 3 =			* 3			×=		OR	x 84=	252
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(4))										+=		OR	+=	
■ If the difference in column 1 is less then zero, enter "0" in column 2										TOTAL		OR	TOTAL	414
CLAIMS AS AMENDED - PART II (Column I) (Column 2) (Column 3)										SMALL	ENTITY	OR	OTHER T	
AMENDMENT A		REMA AF	AIMS AINING TER DMENT		NI PRE	GHE JMB VIOL ID F	ER JSLY	PRESENT EXTRA	RATE × \$=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total (37 CFR 1.16(c))	+	29	Minus	**	29		- 0		× \$=		OR	x \$ <u>/&</u> =	0
	Independent (37 CFR 1.16(b))	•	7	Minus	***		6	= 1		x=		OR OR	x <u>ሄሩ -</u>	86
▼	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR L16(d))									+=		OR	+ =	
(Column I) (Column 2) (Column 3)									A [TOTAL DDIT. FEE		OR	TOTAL DDIT. FEE	86
AMENDMENT B		REM/ AF	AIMS AINING TER DMENT		PRE	GHE UMB VIOI ID F	ER JSLY	PRESENT EXTRA	RAT	RATE	ADDI- TIONAL FEE	OR	RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•		Minus	**			-	11	x S=			x \$=	
	Independent (37 CFR 1.16(b))	٠		Minus	***		-	=	- x=		OR	x=		
^{<}	FIRST PRES	ENTATI	ON OF MI	OF MULTIPLE DEPENDE			NT CLAIM (37 CFR 1.16(d))			+=		OR	+=	
	(Column 1) · (Column 2) (Column 3)									TOTAL DDIT. FEE		OR _A	TOTAL DDIT. FEE	
ENT C		REM/	AIMS AINING FER DMENT		NI PRE	GHE UMB VIOU ID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ğ	Total (37 CFR 1.16(e))	٠		Minus	**			-		x \$=	-	OR	x \$=	
AMENDMI	Independent (37 CFR 1.16(b))	*		Minus	444			=	١.	x=		OR OR	x=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CPR 1.16(6))									+=		OR	+=	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".											OR _A	TOTAL DDIT. FEE	
*** [1	the "Highest Nur	nber Prev	iously Paid	For" IN THE	SPACE	E is le	ss than 3		in t	he appropria	te box in colu	mn I.		